Which Health Care Plan is Better? You Choose.

Key Elements in Health Care Reform	Patients' Choice Act S.1099	Democrats' House Bill H.R. 3200
Cost	Independent <u>estimate</u> : Saves \$70 billion	Costs Half a Trillion dollars Sustainable Growth Rate (\$285 billion) + Reinsurance program (\$10 billion) + mandatory public health fund (\$90 billion) + interest
Choice	If you like what you have, you actually <i>can</i> keep it. Plus about 90% of Americans will have more money in their pocket.	Half of all Americans with private coverage will lose it with a government-run plan, according to the non-partisan Lewin Group.
Coverage	Independent <u>estimate</u> : Covers 75% of uninsured in first 10 years, with autoenrollment eventually covering all	Lewin Group: Fails to cover 16.5 million people Shoves millions of Americans in Medicaid, which is already bankrupt and broken
Bends the Cost Curve	<u>Down</u>	<u>Up</u>
Individual Mandate	None But States may use auto-enrollment for patients at medical and State points of service	2.5 % of Adjusted Gross Income So an individual with an AGI of \$60,000 in one year would be taxed \$1,500 if they did not have insurance
Job-Killing "Pay or Play" Tax	None	Tax of 8% of Employers' Payroll over \$400,000 Plus a \$500,000 tax for any accidental filing errors
Prohibit Pre-existing condition exclusions	Yes	Yes
Minimum Coverage	Same definition of insurance as Members of Congress	Secretary and federal health board can define essential benefit package
	Burdensome mandates which drive up premiums prohibited inside State Exchanges	Can require insurers & taxpayers to fund abortions
Exchange	Optional State-Based, State-Run Exchanges	Federal Government Mandates and Runs "Exchanges" as costly, bureaucratic, and administratively complex as Massachusetts
Board of Washington Bureaucrats	None	Unelected, unaccountable Health Benefits Advisory Committee given broad regulatory authority
Price Controls	None	Allows the Secretary of HHS to impose arbitrary price controls; expands federal price controls in pharmaceutical industry

Low Income - Medicaid Tax Reforms	Medicaid for aged/blind/disabled is preserved Long-term care are capped and grow at an annualized rate Convert Medicaid into premium assistance for low-income families. Subsidies under 200% of FPL. This improves the lives of 45 million moms and kids. Medicaid reforms save the federal government \$260 billion and states \$960 billion About 9 out of 10 households will see a tax cut and keep more of their own money Refundable, Advancable Tax Credits (\$2,290 individual /\$5,710 family) Repeals employee exclusion Businesses can still deduct the cost of employer-sponsored insurance Tax credit goes to the insurer, nearly eliminating vulnerability to fraud Tax credit could be used for prevention	Expands Medicaid eligibility to persons with annual income at 133% of Federal Poverty Level Expansion of Medicaid costs the Federal Government about \$300 billion Expansion of Medicaid shoves millions of Americans in a bankrupt, broken system, promising them coverage but denying them access to care Federal government handouts to eligible families, making up to \$88,200 annually \$818 billion in new taxes, according to the Joint Committee on Taxation "Affordability" of health insurance is determined as 11% adjusted gross income Raises taxes on small business owners (who create 70% of job growth), others with incomes over \$350,000 Perpetuates the regressive current tax code Federal bureaucrats decide whether or not employer-provided coverage is "affordable" Taxes all insurance benefits to pay for comparative
Medical Malpractice Reforms	Optional State-based Health Courts and Expert Panels for malpractice cases	effectiveness research None, despite that defensive medicine means physicians spend at least \$120 billion extra each year, which adds at least \$70 billion to health care costs, or \$1,700 per average American family
Pay Cuts to Physicians	None	Cuts physicians' pay by \$16,000 each year, per physicians
Medicare Advantage	Competitive bidding preserves MA, helps create efficiencies, and realizes savings by using competition to drive costs down	Millions lose their current plan due to cuts of about \$150 billion
Anti-Fraud Provisions	Smart provisions to virtually eliminate some \$100 billion taxpayer dollars lost each year to waste/fraud/abuse in Medicaid & Medicare	Only focused on private insurers, despite that fraud is under 3% of claims and over 70% of private insurers use fraud-detection software
Government-Run Plan	None	New federal bureaucracy which means half of Americans with private coverage will lose it, according to the non-partisan Lewin Group
Introduced in Congress	May 20, 2009	July 14, 2009